

members of that component county unit affirm that they are prepared to give gratuitous service to the wives and infants of enlisted men, and prefer to do this rather than accept the arbitrary fee schedule inflicted upon the medical profession of the United States by the Federal Children's Bureau. The blank forms which the Sacramento Society has drafted are also designed to make it possible for the wives to secure, without cost, such hospitalization as may be available under the plan put out by the Children's Bureau. As a side-comment, it is of interest to note that the appropriations by Congress made no provision to compensate the different States for the printing, clerical, administrative and other expense they were put to in carrying forward the Federal program.

* * *

California's Money Contribution.—In California the sum is large. A tentative cost of the Federal program that has been falling directly upon the treasury of California is about \$85,000, such to cover a period of twelve months. To this should be added about \$15,000 that has been transposed from Federal child welfare activities that have been in successful operation since 1918, and which it has been necessary to set aside.

Worthy of the attention of Congressmen is the fact, that these extra expenditures by the various States are necessary largely because of the complicated checking and cross-checking of Federal Children's Bureau's paper forms and reports. Before Congress, the Bureau's representative presumably gave the impression that their present plan, that is so obnoxious to physicians, conserves Federal moneys. Is such the case, when the extra expenditures of the States are included? Would it not be less expensive, in the long run, if the payments were made direct to the wives, thus doing away with all these annoying and uncalled-for bureaucratic paper reports and procedures? Why not place all the facts before the national legislators?

* * *

A Variable Fee Table: What Maine Advises.—The fee table promulgated by the Federal Children's Bureau varies in different States, according as its representatives have been able, supposedly, to induce authorities in the different commonwealths to undercut established maternity and pediatric fee schedules.

In Maine, for instance, instead of the fifty-dollar fee allowed for California, the stipend to attending physicians is thirty-five dollars.

In the *Journal of the Maine Medical Association* for January, appears a report of its Committee on Maternal and Child Welfare, containing the following paragraph worthy of the attention of members of the California Medical Association:

"Before agreeing to care for a patient under this plan, the physician should explain to her exactly where she stands. She cannot plan to have luxuries on the strength of having no doctor's bill to pay. She cannot have a private room when ward care is obtainable, nor can she have a private nurse unless authorized for good reason. She cannot call

the physician to her home at Government expense, nor can she expect later to call him to the baby to explain trifling symptoms. In short, the plan gives her and her baby necessary care, without frills. Unless the doctor explains this carefully, some unreasonable patients will impose on him."

* * *

Children's Bureau's Multitudinous Rules.—In connection with the plan of the Federal Children's Bureau, members of the Association should not fail to scan—it would take almost too much time to read—the multitudinous rules and regulations which the select circle in the Federal Children's Bureau in Washington, D. C., has seen fit to present to the medical profession of the United States. These are printed in small type in *The Journal of the American Medical Association* for January 22, 1944, on pages 241-246 inclusive. Inspection of the same should convince readers concerning the kind of medical practice that will obtain in the days to come in case the Wagner-Dingell-Murray bill (S. 1161; H. R. 2861) is enacted.

At the annual conference of State Association secretaries and editors, held at the American Medical Association headquarters in Chicago on November 20 and 21, 1943, the Federal Children's Bureau program was one of the topics on the program. *The Journal of the American Medical Association* for January 15, 1944, on pages 171-178, presents the paper by Dr. L. Fernald Foster of Michigan and the comments which followed. The recital of California's experience with the Children's Bureau's representative, Dr. Edwin F. Daily, appears in the current issue of CALIFORNIA AND WESTERN MEDICINE, on page 77 (Item XLIII).

CALIFORNIA MEDICAL ASSOCIATION'S PUBLIC RELATIONS SURVEY OF CALIFORNIA

The Survey Has Been Made.—By now, component county societies and members who are interested in the rapidly moving legislative procedures related to adequate medical care, as proposed in Social Security plans such as the Wagner-Murray-Dingell bill (S. 1161; H. R. 2861), are aware that the Council of the California Medical Association authorized a survey,* in an effort to secure accurate information on the attitude of California citizens concerning the medical profession and proposed Federal legislation of a socialized medicine nature.

In CALIFORNIA AND WESTERN MEDICINE for January, on page 5, a brief progress report was given. To permit those who are interested—and every member of the California Medical Association should be very much concerned—Item 5 of the minutes of the 314th meeting of the California Medical Association Council, which will appear in full in the March number of CALIFORNIA AND WESTERN MEDICINE, is presented in advance so that readers may have further information as to the survey that has been made.

* References to Council minutes in CALIFORNIA AND WESTERN MEDICINE: August, 1943, Item 9 on page 173; November, 1943, Item 5 on page 273.

Information Concerning the Nature of the Survey.—The text of the minutes concerning the survey (Item 5) follows:

"Public Opinion Survey re Medical Profession:

"The firm of Foote, Cone & Belding, through its representative, Mr. John R. Little, submitted a report on the 'Survey of Public Relations of the California Medical Profession as of January, 1944.' The same was a survey of 5,090 personally conducted interviews with a representative cross section of the population of the State of California, made during the month of November, 1943.

"Mr. Little submitted an interpretative report to the Council, the same being the considered opinion of a 24-man board of public opinion specialists associated with the firm of Foote, Cone & Belding.

"The interpretative report dealt with the 232-page detailed report and tabulation, copies of which were also submitted. The mimeographed report of more than 200 pages exhaustively covered many subjects vital to the medical profession. It was stated that the survey was accurate to within a very small degree of error. For the basis of calculation, the population of California was taken as seven million. By using the tables in the survey, it is possible to determine what is the opinion of lay citizens, in relation to medical practice and proposed Federal legislation as shown in various geographical districts, according to factors such as sex, age, occupation, size of city, income class, length of residence, etc.

"Mr. Little stated that one of the heart-warming elements of the survey was the high opinion in which most citizens hold the profession of medicine. The difficulties facing the medical profession dealt, however, with other factors. The interpretative report by Mr. Little dwelt only on one or two of the more important elements involved.

"Questions and discussion followed. Upon motion made and seconded, it was voted that, until such time as was deemed proper by the Council, the contents of the interpretative and of the complete mimeographed report be held as confidential. In the meantime, members of the Council will study the report in detail for better orientation and understanding, in connection with action to be taken at the next meeting of the Council.

"Statement was submitted by Foote, Cone & Belding for the costs of the service rendered in making the survey, in the amount of \$7,198.46, and on motion made and seconded, payment was authorized. Several councilors expressed themselves as believing the facts brought out more than justified the expense involved."

Concerning the above, more will appear in future issues of the OFFICIAL JOURNAL.

MIGRATORY AGRICULTURAL WORKERS OF CALIFORNIA: THEIR HEALTH CARE

Problem of Medical Care of Migrant Agricultural Workers.—Care of the health of thousands of needy agricultural workers, both those who are residents of California and the large num-

ber who voluntarily, or through Federal aid as in the case of the Mexicans, are brought into the State—to move from place to place and work on the various crops, as they mature—is a subject which to some may seem to be of interest to only a limited number of California citizens. The problem of medical aid, however, to many of these needy workers and their families who are, or have been, and in places are still called upon to live and work under conditions that fail to conform to minimum public health standards as regards housing environment and facilities is, nevertheless, one that should be of wide concern to all Californians. Physicians need not stretch their imagination to visualize how such itinerant workers, who are often poorly nourished and diseased, when grouped together under conditions not by any means sanitary, may become a menace not only to themselves, but to the citizens of nearby communities, and so to the people of the State at large.

* * *

Proposed Legislation of Recent Months.—Recent issues of CALIFORNIA AND WESTERN MEDICINE* have presented comment on these problems, with special reference to legislation still pending in the United States Congress, which, if enacted, may nullify much of the good work that has been carried on under the direction of the governmental corporation—"Agricultural Workers' Health and Medical Association." This nonprofit organization came into existence in 1938 through the efforts of the regional directors of the Federal Farm Security Administration, who at that time were faced with the problem of giving indicated medical attention to needy agricultural workers and their families. A large number of such workers were not citizens of California and, therefore, ineligible for care in county and similar public hospitals. Up to that time the burden of giving gratuitous service to these unfortunates, in good part, had fallen upon the shoulders of civilian physicians in the various communities where these migrants were quartered.

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How California Medical Association Became Interested.—It was then that the Governmental authorities requested advice and help from our State Association. The California Medical Association Council responded by nominating Dr. Karl L. Schaupp, present president of the California Medical Association, to represent it. Here it is sufficient to state that under the direction of himself and that of his two physician colleagues, the medical service for the needy migratory workers has been carried on in manner that has subverted the best standards of healing-art care, in so far as appropriations permitted.

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Recent Legislative Proposals.—During the past several months, through influences not altogether discernible, in one of the political and departmental interchanges or mix-ups, so frequently in evidence nowadays at Washington, D. C., the

* References in CALIFORNIA AND WESTERN MEDICINE: November, 1943, pages 287-289; December, pages 343-344; January, 1944, pages 32-33.